

INCIDENT REPORT	INCIDENT NUMBER	REPORT NUMBER	REPORT TYPE
	09AUG19-39KH-00426-12BMA	190230100426 REVISION 1	INITIAL

PRIVACY ACT STATEMENT

AUTHORITY: 5 U.S.C. 301; 10 U.S.C. 5031; 44 U.S.C. 3103 and EO 9397
PRINCIPAL PURPOSE: Used to record information and details of criminal activity which may require investigative action by commanding officers, supervisors, security police, NCIS special agents, etc. Used to provide information to the appropriate individuals within DoD organizations who ensure that proper legal and administrative action is taken.
ROUTINE USES: Information may be disclosed to local, county, state and federal law enforcement or investigatory authorities for investigation and possible criminal prosecution or civil court action. Information extracted from this form may be used in other related criminal and/or civil proceedings.
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SECTION I. ADMINISTRATIVE

Incident Subject : MEDICAL ASSISTANCE/BOATING INCIDENT

Date Received 09-AUG-2019	Time Received 0445	Incident Received In Person	Start Date / Time of Incident 09-AUG-2019 0445	End Date / Time of Incident 09-AUG-2019 0521
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Weather : Cloudy **Lighting :** Dark (Not Lighted)

SECTION II. COMPLAINANT(S)

SECTION III. OFFENSE(S)

SECTION IV. PROPERTY

SECTION IV. PROPERTY - NARCOTIC(S)

SECTION IV. PROPERTY - VEHICLE(S)

SECTION V. VICTIMS(S)

VICTIM	Victim Type Individual	DD2701 Issued
Name	ID Num	Rank
(b) (6), (b) (7)(C)		
Branch of Service	Personnel Type	Status
(b) (6), (b) (7)(C)		
Date of Birth	Place of Birth	
Sex : Male	Race : White	Ethnicity : Not Hispanic
Resident of Jurisdiction : Resident		
Address		
(b) (6), (b) (7)(C)		
Organization	UIC / RUC	Work Telephone
(b) (6), (b) (7)(C)		

ADDITIONAL VICTIM INFORMATION

Offense(s) Committed Against This Victim :

Relationship of Victim to Suspect(s) :

Aggravated Assault Circumstances :

Injury Type(s):
Possible Int. Injuries , Apparent Minor Injury , Unconsciousness

SECTION VI. WITNESS/SPONSOR - WITNESS(S)

WITNESS	DD2701 Issued :
Name	Rank
(b) (6), (b) (7)(C)	
Branch of Service	Personnel Type
UNKNOWN	
Date of Birth	Place of Birth
Address	
(b) (6), (b) (7)(C)	
Organization	UIC / RUC
(b) (6), (b) (7)(C)	

SECTION VI. WITNESS/SPONSOR - SPONSOR(S)

SECTION VII. SUSPECT(S) / ARRESTEE(S)

SECTION VIII. ADDITIONAL POLICE OFFICERS

POLICE OFFICER			
Name (b) (6), (b) (7)(C)		Rank	
Branch of Service Marine Corps	Personnel Type MILITARY	Status Regular (Active)	Organization PMO

POLICE OFFICER			
Name (b) (6), (b) (7)(C)		Rank	
Branch of Service Marine Corps	Personnel Type MILITARY	Status Regular (Active)	Organization HQB N PMO

POLICE OFFICER			
Name (b) (6), (b) (7)(C)		Rank	
Branch of Service	Personnel Type CIVILIAN	Status CIVILIAN EMPLOYEE	Organization HQB N/PMO

POLICE OFFICER			
Name (b) (6), (b) (7)(C)		Rank	
Branch of Service	Personnel Type CIVILIAN	Status CIVILIAN EMPLOYEE	Organization PMO

SECTION IX. NARRATIVE

At 0445, 09 Aug 19, Military Police (b) (6), (b) (7)(C) were conducting a Random Antiterrorism Measure (RAM) at the MCCS Marina. While conducting a scheduled walking patrol of the area, Military Police (b) (6), (b) (7)(C) stated to dispatch that they could hear an unknown person later identified as (b) (6), (b) (7)(C) yelling for help out in the bay. (b) (6), (b) (7)(C) could also hear someone yelling for help.

At 0446, 09 Aug 19, Military Police conducted an area search for the distressed swimmer from the Marina's pier. Due to lack of visibility, Military Police were unable to locate the swimmer and notified Waterfront Operations. Military Police continued to yell to the unknown swimmer to obtain a better location. Military Police were able to determine the swimmer was to the left of the pier approximately 200 meters out.

At 0454, 09 Aug 19, Waterfront Operations (b) (6), (b) (7)(C) dispatched from their port.

At 0500, 09 Aug 19, Waterfront Operations arrived on scene and conducted an area search for the distressed swimmer.

At 0515, 09 Aug 19, Military Police (b) (6), (b) (7)(C) and Waterfront Operations (b) (6), (b) (7)(C) located (b) (6), (b) (7)(C) resting on the mast of his sunken boat approximately 200 meters from the shoreline. (b) (6), (b) (7)(C) was submerged in the water to his neck and continued to go in and out of consciousness. Military Police Dispatcher (b) (6), (b) (7)(C) notified Military 911 of the situation and requested Medical Aid for (b) (6), (b) (7)(C).

At 0518, 09 Aug 19, Waterfront Operations (b) (6), (b) (7)(C) were able to retrieve the swimmer from the mast safely. (b) (6), (b) (7)(C) appeared exhausted, bleeding from the nose and forehead, and was going in and out of consciousness. (b) (6), (b) (7)(C) stated that his boat had sank, which caused his injuries. Waterfront Operations moved (b) (6), (b) (7)(C) to the shore. Military Police (b) (6), (b) (7)(C) and (b) (6), (b) (7)(C) picked (b) (6), (b) (7)(C) out of the boat and lifted him onto the grass adjacent the pier. Military Police (b) (6), (b) (7)(C) stabilized (b) (6), (b) (7)(C)'s head throughout the movement. Military Police (b) (6), (b) (7)(C) noticed (b) (6), (b) (7)(C)'s skin was pale and cold to the touch and had a slimy texture. Military Police (b) (6), (b) (7)(C) asked (b) (6), (b) (7)(C) if anyone else was with him on the boat to which (b) (6), (b) (7)(C) replied "no." Military Police (b) (6), (b) (7)(C) applied pressure to the gash on (b) (6), (b) (7)(C)'s head. Military Police (b) (6), (b) (7)(C) retrieved a blanket from the patrol car and covered (b) (6), (b) (7)(C) after Military Police removed some wet clothing.

At 0521, 09 Aug 19, FFD and ALS arrived on scene and began to medically evaluate (b) (6), (b) (7)(C).

At 0542, 09 Aug 19, ALS transported (b) (6), (b) (7)(C) to Tripler Army Medical Center for further evaluation.

At 0550, 09 Aug 19, Military Police cleared the scene without further incident.

MP Note: Military Police could not determine what causes the boat to sink.

ENCLOSURE(S)	
ENCL #	DESCRIPTION
1	CLEOC Statistics Sheet

SECTION X. REPORTING/APPROVING OFFICIALS

Reporting Official	Date	Approving Official	Date
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(b) (6), (b) (7)(C)
Operations Military Policeman

15-AUG-2019

(b) (6), (b) (7)(C)
Assistant Operations Officer

15-AUG-2019
FINAL APPROVED ON 15-AUG-
2019

SECTION XI. ADMINISTRATIVE DISPOSITION

Victim/Witness Notification

Incident Status

Date Cleared

0 Victims Notified

0 Witnesses Notified

Referred To/Assumed By :

Distribution :



UNITED STATES MARINE CORPS

PROVOST MARSHAL OFFICE
MARINE CORPS BASE HAWAII
P.O. BOX 63062
KANEHOE BAY, HAWAII 96863-3062
CAMP SMITH, HAWAII 96818



CLEOC Statistics Sheet

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Case Control Number	Journal #	Date	Time Reported	Type of Incident
		09 AUG 19	0445	MED ASSIST / SUNKEN BOAT
Original Complaint	MED ASSIST		Location of MP contact w/ individual	Location of Incident
			MARINA PIER	KANEHOE BAY

Name (Last, First Middle Name)	SSN	DOB	POB	Rank/Branch		
(b) (6), (b) (7)(C)	(b) (6), (b) (7)(C)	(b) (6), (b) (7)(C)	(b) (6), (b) (7)(C)	(b) (6), (b) (7)(C)		
Unit	Address	Clearance	Work Phone	Home Phone		
(b) (6), (b) (7)(C)	(b) (6), (b) (7)(C)	(b) (6), (b) (7)(C)	(b) (6), (b) (7)(C)	(b) (6), (b) (7)(C)		
Sex	Race	Hair	Eyes	Height	Weight	Individual Type (Circle One)
(b) (6), (b) (7)(C)	(b) (6), (b) (7)(C)	(b) (6), (b) (7)(C)	(b) (6), (b) (7)(C)	(b) (6), (b) (7)(C)	(b) (6), (b) (7)(C)	SUSP ARRESTEE VICT WITN SPON COMP
Appearance, Demeanor, and Dress (Provide Drivers License Number and State if Applicable)						

Name (Last, First Middle Name)	SSN	DOB	POB	Rank/Branch		
(b) (6), (b) (7)(C)	(b) (6), (b) (7)(C)	(b) (6), (b) (7)(C)	(b) (6), (b) (7)(C)	(b) (6), (b) (7)(C)		
Unit	Address	Clearance	Work Phone	Home Phone		
(b) (6), (b) (7)(C)	(b) (6), (b) (7)(C)	(b) (6), (b) (7)(C)	(b) (6), (b) (7)(C)	(b) (6), (b) (7)(C)		
Sex	Race	Hair	Eyes	Height	Weight	Individual Type (Circle One)
(b) (6), (b) (7)(C)	(b) (6), (b) (7)(C)	(b) (6), (b) (7)(C)	(b) (6), (b) (7)(C)	(b) (6), (b) (7)(C)	(b) (6), (b) (7)(C)	SUSP ARRESTEE VICT WITN SPON COMP
Appearance, Demeanor, and Dress (Provide Drivers License Number and State if Applicable)						

Name (Last, First Middle Name)	SSN	DOB	POB	Rank/Branch		
(b) (6), (b) (7)(C)	(b) (6), (b) (7)(C)	(b) (6), (b) (7)(C)	(b) (6), (b) (7)(C)	(b) (6), (b) (7)(C)		
Unit	Address	Clearance	Work Phone	Home Phone		
(b) (6), (b) (7)(C)	(b) (6), (b) (7)(C)	(b) (6), (b) (7)(C)	(b) (6), (b) (7)(C)	(b) (6), (b) (7)(C)		
Sex	Race	Hair	Eyes	Height	Weight	Individual Type (Circle One)
(b) (6), (b) (7)(C)	(b) (6), (b) (7)(C)	(b) (6), (b) (7)(C)	(b) (6), (b) (7)(C)	(b) (6), (b) (7)(C)	(b) (6), (b) (7)(C)	SUSP ARRESTEE VICT WITN SPON COMP
Appearance, Demeanor, and Dress (Provide Drivers License Number and State if Applicable)						

Name (Last, First Middle Name)	SSN	DOB	POB	Rank/Branch		
(b) (6), (b) (7)(C)	(b) (6), (b) (7)(C)	(b) (6), (b) (7)(C)	(b) (6), (b) (7)(C)	(b) (6), (b) (7)(C)		
Unit	Address	Clearance	Work Phone	Home Phone		
(b) (6), (b) (7)(C)	(b) (6), (b) (7)(C)	(b) (6), (b) (7)(C)	(b) (6), (b) (7)(C)	(b) (6), (b) (7)(C)		
Sex	Race	Hair	Eyes	Height	Weight	Individual Type (Circle One)
(b) (6), (b) (7)(C)	(b) (6), (b) (7)(C)	(b) (6), (b) (7)(C)	(b) (6), (b) (7)(C)	(b) (6), (b) (7)(C)	(b) (6), (b) (7)(C)	SUSP ARRESTEE VICT WITN SPON COMP
Appearance, Demeanor, and Dress (Provide Drivers License Number and State if Applicable)						

Name (Last, First Middle Name)	SSN	DOB	POB	Rank/Branch		
(b) (6), (b) (7)(C)	(b) (6), (b) (7)(C)	(b) (6), (b) (7)(C)	(b) (6), (b) (7)(C)	(b) (6), (b) (7)(C)		
Unit	Address	Clearance	Work Phone	Home Phone		
(b) (6), (b) (7)(C)	(b) (6), (b) (7)(C)	(b) (6), (b) (7)(C)	(b) (6), (b) (7)(C)	(b) (6), (b) (7)(C)		
Sex	Race	Hair	Eyes	Height	Weight	Individual Type (Circle One)
(b) (6), (b) (7)(C)	(b) (6), (b) (7)(C)	(b) (6), (b) (7)(C)	(b) (6), (b) (7)(C)	(b) (6), (b) (7)(C)	(b) (6), (b) (7)(C)	SUSP ARRESTEE VICT WITN SPON COMP
Appearance, Demeanor, and Dress (Provide Drivers License Number and State if Applicable)						

190230100426

ENCLOSURE(1)

CLEOC STATISTICS SHEET CONTINUED

Name (Last, First Middle Name)			SSN		DOB		POB		Rank/Branch		
Unit			Address			Clearance		Work Phone		Home Phone	
Sex	Race	Hair	Eyes	Height	Weight	Individual Type (Circle One)					
						SUSP	ARRESTEE	VICT	WITN	SPON	COMP
Appearance, Demeanor, and Dress (Provide Drivers License Number and State if Applicable)											

Name (Last, First Middle Name)			SSN		DOB		POB		Rank/Branch		
Unit			Address			Clearance		Work Phone		Home Phone	
Sex	Race	Hair	Eyes	Height	Weight	Individual Type (Circle One)					
						SUSP	ARRESTEE	VICT	WITN	SPON	COMP
Appearance, Demeanor, and Dress (Provide Drivers License Number and State if Applicable)											

Related Vehicle Information

Decal Color/Base		Year	Make	Model		Body Style		Color	
License Plate/State		Expiration	Safety Exp.	VIN (Legible Please)			R/C Name		
Insurance Company			Insurance Policy/Expiration Date			DoD Decal		DoD Expiration	

Decal Color/Base		Year	Make	Model		Body Style		Color	
License Plate/State		Expiration	Safety Exp.	VIN (Legible Please)			R/C Name		
Insurance Company			Insurance Policy/Expiration Date			DoD Decal		DoD Expiration	

Additional information

Time of Day Incident Occurred NIGHT		Safety Issues None Yes (Explain)		VWOF Issued Yes NO Date	
Alcohol Involved Yes NO (Who DOB)		Alcohol Involved (Continued) Type of ID Verified Type of Alcohol			
Lighting (Circle) Dark (Lighted Dark (Not Lighted) Dawn Daylight Dusk)		Weather (Sunny, Cloudy , Rainy, Etc.)			
CID Notified Yes NO Time Assume/Decline		Were children present Yes NO Age/Sex			
Canvassing Interviews Conducted Yes NO		Canvassed Addresses		Condition of Quarters (if applicable) Clean NO Other	
Ask: "Is there anything else I can assist you with at this time?" Yes NO Time/Date (If Yes) What					

VPs Related:

(b) (6), (b) (7)(C)

NOTIFICATIONS:

0446 WATERFRONT OPS (b) (6), (b) (7)(C)
0450 (b) (6), (b) (7)(C) OPS CHIEF
0451 OPS O

Military Police Notes:
